

Office of Student Activities and Services (OSAS)

STUDENT ORGANIZATION UPDATE FORM

NAME OF ORGANIZATION (as it appears in the organization's constitution):

President: Check if new ☒

Name Ryan White

Address

Email

Phone Number

Treasurer: Check if new ☒

Name Timothy Dunn

Email_

Phone Number

Faculty/Staff Advisor: Check if new _____

Name_____

E-Mail

Department _____

Campus Phone

Building & Room Number

Signature of Advisor _____

Date _____

(Required for new advisor)

Signature of Primary Officer

Date _____

Date Submitted: 3-28-07

Received by: HK

Office Use Only

Inputted in Access:

Added to Listserv:

3/28/07